S

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate scl for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 28 OF 28 (check only one) 17
	ly information copied from such Reports and Statem for commercial purposes, other than using the nam				person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Schock for Congress		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Α.	Full Name (Last, First, Middle Initial) ILLINOIS REPUBLICAN PARTY				Date of Disbursement
	Mailing Address P.O. BOX 64897				10 09 2014
	City Si CHICAGO IL Purpose of Disbursement	tate	Zip Code 60664		Amount of Each Disbursement this Period
	Contribution				Transaction ID : B471B832A27304C3B814
	Candidate Name			Category/ Type	
	President	ent For: Primary Other (s _l	X General		
_	State: District: Full Name (Last, First, Middle Initial)				
В.	Committee to Floot Willard Linzy				Date of Disbursement
	Mailing Address PO Box 36242				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code			Amount of Each Disbursement this Period	
	Oklahoma City OK 73136-2242 Purpose of Disbursement Contribution(State/Local Committee)				1000.00
	Candidate Name				Transaction ID : BD9517C4CBB7543F39A7
	Office Sought: House Disbursem Senate Fresident		X General	Туре	
	State: District:				
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement
	Mailing Address				M M / D D / Y Y Y
	City State Zip Code				Amount of Each Disbursement this Period
	Purpose of Disbursement				1
	Candidate Name				1
		ent For: Primary Other (si	General		
	State: District:				
s	UBTOTAL of Disbursements This Page (optional)				11000.00

TOTAL This Period (last page this line number only).....

11000.00